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102903  
10/696230  
38243UTILITY  
PATENT APPLICATION  
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	ALLEG-042PUS
First Inventor	Andrew Notman
Title	Multi-Mode Switching Regulator
Express Mail Label No.	EU507176164US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO:  
Commissioner for Patents  
Mail Stop Patent Application  
P.O. Box 1450  
Alexandria VA 22313-1450

- |                                                                                                                                                                               |                                                                                                                                                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br>(Submit an original and a duplicate for fee processing)                                      | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or<br>Computer Program (Appendix)                                                 |
| 2. <input type="checkbox"/> Applicant claims small entity status.<br>See 37 CFR 1.27.                                                                                         | 8. Nucleotide and/or Amino Acid Sequence Submission<br>(if applicable, all necessary)                                                                  |
| 3. <input checked="" type="checkbox"/> Specification [Total Pages 38]<br>(preferred arrangement set forth below)                                                              | a. <input type="checkbox"/> Computer Reader Form (CRF)                                                                                                 |
| - Descriptive title of the invention                                                                                                                                          |                                                                                                                                                        |
| - Cross Reference to Related Applications                                                                                                                                     |                                                                                                                                                        |
| - Statement Regarding Fed sponsored R & D                                                                                                                                     |                                                                                                                                                        |
| - Reference to sequence listing, a table,<br>or a computer program listing appendix                                                                                           |                                                                                                                                                        |
| - Background of the Invention                                                                                                                                                 |                                                                                                                                                        |
| - Brief Summary of the Invention                                                                                                                                              |                                                                                                                                                        |
| - Brief Description of the Drawings (if filed)                                                                                                                                |                                                                                                                                                        |
| - Detailed Description                                                                                                                                                        |                                                                                                                                                        |
| - Claim(s)                                                                                                                                                                    |                                                                                                                                                        |
| - Abstract of the Disclosure                                                                                                                                                  |                                                                                                                                                        |
| 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 17]                                                                                           | 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))                                                                              |
| 5. Oath or Declaration [Total Sheets 3]                                                                                                                                       | 10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of<br>(when there is an assignee) Attorney             |
| a. <input checked="" type="checkbox"/> Newly executed (original or copy)                                                                                                      | 11. <input type="checkbox"/> English Translation Document (if applicable)                                                                              |
| b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))<br>(for continuation/divisional with Box 18 completed)                                             | 12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1499 <input checked="" type="checkbox"/> Copies of IDS<br>Citations |
| i. <input type="checkbox"/> DELETION OF INVENTOR(S)<br>Signed statement attached deleting inventor(s)<br>name in the prior application, see 37 CFR<br>1.63(d)(2) and 1.33(b). | 13. <input type="checkbox"/> Preliminary Amendment                                                                                                     |
| 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76                                                                                                           | 14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br>(Should be specifically itemized)                                        |
|                                                                                                                                                                               | 15. <input type="checkbox"/> Certified Copy of Priority Document(s)<br>(if foreign priority is claimed)                                                |
|                                                                                                                                                                               | 16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122<br>(b)(2)(B)(i). Applicant must attach form PTO/SB/35<br>or its equivalent.    |
|                                                                                                                                                                               | 17. <input checked="" type="checkbox"/> Other: Pat. Appl. Title Pg. ....                                                                               |

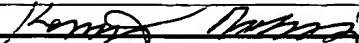
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation       Divisional       Continuation-in-part (CIP)      of prior application No.: .....Prior application information: Examiner \_\_\_\_\_ Art Unit: \_\_\_\_\_  
For CONTINUATION OF DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference.  
The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	022494	OR <input checked="" type="checkbox"/> Correspondence address below
(Insert Customer No. or Attach Bar Code Label here)		

Name	Kermit Robinson		
Address	Daly, Crowley & Mofford, LLP 275 Turnpike Street, Suite 101		
City	Canton	State	MA
Country	USA	Telephone	781.401.9988 ext. 24
		Zip Code	02021-2354
		Fax	781-401-9966

Name (Print/Type)	Kermit Robinson	Registration No. (Attorney/Agent)	48,734
Signature			
Date	Oct 29, 2003		

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

102903  
16310 U.S.PTO  
PTO/SB/17 (10-03)  
Approved for use through 07/31/2006. OMB 0651-0032  
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# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 1,442)

## Complete if Known

Application Number	Not Yet Assigned
Filing Date	October 29, 2003
First Named Inventor	Andrew Notman
Examiner Name	Not Yet Assigned
Art Unit	Not Yet Assigned
Attorney Docket No.	ALLEG-042PUS

## METHOD OF PAYMENT (check all that apply)

Check  Credit card  Money Order  Other  None

Deposit Account:

Deposit Account Number 010854  
Deposit Account Name Allegro Microsystems, Inc.

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) or any underpayment of fee(s)  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION (continued)

### 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	770
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
<b>SUBTOTAL (1)</b>		<b>(\$ 770)</b>	
<b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b>			
Fee from Extra Claims below			
Total Claims 48	-20** = 28	X 18 = 504	
Independent Claims 5	- 3** = 2	X 84 = 168	
Multiple Dependent			
<b>Large Entity</b>		<b>Small Entity</b>	
Fee Code (\$)	Fee Code (\$)	Fee Description	
1202 18	2202 9	Claims in excess of 20	
1201 86	2201 43	Independent claims in excess of 3	
1203 290	2203 145	Multiple dependent claim, if not paid	
1204 86	2204 43	** Reissue independent claims over original patent	
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent	
<b>SUBTOTAL (2)</b>		<b>(\$ 672)</b>	
*or number previously paid, if greater. For Reissues, see above			
Other fee (specify) _____			
*Reduced by Basic Filing Fee Paid			<b>SUBTOTAL (3) (\$ 0)</b>

(Complete if applicable)

SUBMITTED BY	Judith C. Crowley	Registration No. (Attorney/Agent)	35,091	Telephone 781.401.9988 ext. 12
Signature	Judith C. Crowley			Date 29 October 2003

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

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